

2018 Notice of Intent to Gather Signatures for Candidacy

Printed Name (Print name exactly as it is to be printed on the official ball	
Printed Name (Print name exactly as it is to be printed on the official ball	ot)
Political Party	
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Office HOUSE of REPRESENTATIVES	District
UTARE HOUSE of REPRESENTATIVES Office 1289 NORTH 1500 EAST -LOGA Physical Address	N, WT 84341
SAME Mailing Address	
4/35-753-1394 (H) 4/35-770-2512(C) 435-753-8050(O) Telephone Number MERRILL - CREG @ ComCAST, NET Twitter Handle (optional)	
MERRILLO GREG @ COMCAST, NET Email Address Twitter Handle (optional)	
Please read and initial the statements below: Lam I agree to file all campaign financial disclosure reports, and I understand the statements below:	stand that failure to do so may result
in possible fines and/or criminal penalties. I understand that the filing officer will not begin verifying my petition signatures until I have submitted a sufficient number of verifiable signatures to meet the signature threshold.	
I understand that candidate petition packet submissions are verified in the same order as they are received by the filing officer.	
I have provided a valid email, and I understand this will be used for official communications and updates from election officials. If no email is available I have provided a valid physical address.	
I understand this form is not a declaration of candidacy and I must of appropriate filing officer during the declaration of candidacy period 5:00 pm).	
Signature of Candidate)	1/2//8
Signature of Candidate	Date /
Skum I Hoch	AM/PM
Signature of Filing Officer	Date / Time Submitted

CLERK-JAN2'18AM11:08:41